

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name	Taocon, Inc.	
2. All other names debtor used in the last 8 years Include any assumed names, trade names and doing business as names		
3. Debtor's federal Employer Identification Number (EIN)	13-3731676	
4. Debtor's address	Principal place of business 244 Fifth Avenue New York, NY 10001 Number, Street, City, State & ZIP Code New York County	Mailing address, if different from principal place of business P.O. Box, Number, Street, City, State & ZIP Code Location of principal assets, if different from principal place of business Number, Street, City, State & ZIP Code
5. Debtor's website (URL)	http://www.taocon.com/	
6. Type of debtor	<input checked="" type="checkbox"/> Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) <input type="checkbox"/> Partnership (excluding LLP) <input type="checkbox"/> Other. Specify:	

Debtor **Taocon, Inc.**
Name

Case number (if known)

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Railroad (as defined in 11 U.S.C. § 101(44))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☒ Chapter 7
☐ Chapter 9
☐ Chapter 11. *Check all that apply:*

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
☐ A plan is being filed with this petition.
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

- ☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

- ☒ No.
☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	_____	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Taocon, Inc.** Case number (if known) _____
Name

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property? _____

Number, Street, City, State & ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds

Check one:

☐ Funds will be available for distribution to unsecured creditors.

☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors

☐ 1-49

☐ 50-99

☒ 100-199

☐ 200-999

☐ 1,000-5,000

☐ 5001-10,000

☐ 10,001-25,000

☐ 25,001-50,000

☐ 50,001-100,000

☐ More than 100,000

15. Estimated Assets

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☒ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

16. Estimated liabilities

☐ \$0 - \$50,000

☐ \$50,001 - \$100,000

☐ \$100,001 - \$500,000

☐ \$500,001 - \$1 million

☒ \$1,000,001 - \$10 million

☐ \$10,000,001 - \$50 million

☐ \$50,000,001 - \$100 million

☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion

☐ \$1,000,000,001 - \$10 billion

☐ \$10,000,000,001 - \$50 billion

☐ More than \$50 billion

Fill in this information to identify your case:

United States Bankruptcy Court for the:

SOUTHERN DISTRICT OF NEW YORK

Case number (if known)

Chapter 7

☐ Check if this an
amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

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For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 15, 2016
MM / DD / YYYY

X /s/ Steven Lamazor
Signature of authorized representative of debtor

Steven Lamazor
Printed name

Title President

18. Signature of attorney

X /s/ Tracy L. Klestadt
Signature of attorney for debtor

Date November 15, 2016
MM / DD / YYYY

Tracy L. Klestadt
Printed name

Klestadt Winters Jureller Southard & Stevens, LLP
Firm name

200 West 41st Street
17th Floor
New York, NY 10036-7203
Number, Street, City, State & ZIP Code

Contact phone (212) 972-3000 Email address tklestadt@klestadt.com

2089985
Bar number and State

Fill in this information to identify the case:

Debtor name Taocon, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an
amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 15, 2016

X /s/ Steven Lamazor

Signature of individual signing on behalf of debtor

Steven Lamazor

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Taocon, Inc.**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 566,593.04
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 566,593.04

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 225,749.42
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 0.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 3,182,282.06
4. Total liabilities Lines 2 + 3a + 3b	\$ 3,408,031.48

Fill in this information to identify the case:

Debtor name Taocon, Inc.
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1.	Citibank, N.A., Branch #848 395 Third Avenue New York, NY 10014	Payroll	4859	\$0.00
3.2.	Citibank, N.A., Branch #848 395 6th Avenue New York, NY 10014	Operating	3382	\$11.38
3.3.	Chase Bank, N.A. 225 5th Avenue New York, NY 10010	Checking	9756	\$4.32
3.4.	Chase Bank, N.A. 225 5th Avenue New York, NY 10010	Savings	7603	\$0.00

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$15.70

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.

Debtor **Taocon, Inc.** Case number (If known) _____
Name

☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
Description, including name of holder of deposit

7.1. **Security deposit for office lease** **\$10,733.34**

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$10,733.34

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: **1,274,356.00** - **723,512.00** = **\$550,844.00**
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$550,844.00

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☒ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

Debtor **Taocon, Inc.** Case number (If known) _____
Name

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
	Various machinery and office equipment	\$0.00		\$5,000.00

51. **Total of Part 8.** **\$5,000.00**
Add lines 47 through 50. Copy the total to line 87.

52. **Is a depreciation schedule available for any of the property listed in Part 8?**
☒ No
☐ Yes
53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 9: Real property

54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor **Taocon, Inc.** Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$15.70	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$10,733.34	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$550,844.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$5,000.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$566,593.04	\$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$566,593.04

Fill in this information to identify the case:

Debtor name **Taocon, Inc.**
United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1	Citibank - Credit Line Creditor's Name P.O. Box 9241 Uniondale, NY 11555 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number 0664 Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. 1. Citibank - Credit Line 2. Mark Grady	Describe debtor's property that is subject to a lien All assets. Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$175,749.42 \$550,844.00

2.2	Mark Grady Creditor's Name 270 Lenox Avenue South Orange, NJ 07079 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien All assets Describe the lien Is the creditor an insider or related party? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply	\$50,000.00 \$550,844.00
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Debtor **Taocon, Inc.**

Name

Case number (if know)

☐ No

☐ Contingent

☒ Yes. Specify each creditor,
including this creditor and its relative
priority.

☐ Unliquidated

☐ Disputed

Specified on line 2.1

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$225,749.42

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

Fill in this information to identify the case:

Debtor name **Taocon, Inc.**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☒ No. Go to Part 2.

☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address A.R. Equipment LLC 174 St. George Road Staten Island, NY 10306 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,150.30
3.2	Nonpriority creditor's name and mailing address Alejandro Ramirez Magana 721 5th Avenue, #61AB New York, NY 10022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.3	Nonpriority creditor's name and mailing address Alex & Hildemarie Ladouceur 540 4th Street Brooklyn, NY 11215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.4	Nonpriority creditor's name and mailing address All Boro Floor Service, Inc. 135 East 233rd Street Bronx, NY 10470 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,000.00

Debtor **Taocon, Inc.**
Name

Case number (if known)

3.5	Nonpriority creditor's name and mailing address Allied Building Products Corp. 15 E. Union Avenue East Rutherford, NJ 07073 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$828.89
3.6	Nonpriority creditor's name and mailing address Allstate Sprinkler Corp 1869 White Plains Road Bronx, NY 10462 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,303.70
3.7	Nonpriority creditor's name and mailing address American Security Systems, Inc. 5-44 50th Avenue Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,182.93
3.8	Nonpriority creditor's name and mailing address Apex Construction Inc. 25-03 Boden Avenue Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,375.00
3.9	Nonpriority creditor's name and mailing address Apollo Electric USA, Inc. DBA Alpha Elec 71-51 70th Street Ridgewood, NY 11385 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$64,939.00
3.10	Nonpriority creditor's name and mailing address Arista Air Conditioning Corp. 38-26 Tenth Street Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,820.03
3.11	Nonpriority creditor's name and mailing address Art-In-Construction, Ltd. 63 Flushing Avenue, Unit 109 Building 3, Shite 101 Brooklyn, NY 11205 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,812.25

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3.12	Nonpriority creditor's name and mailing address Benra & Dual Tilt Windows & Doors Mfg. C 229 Green Street Brooklyn, NY 11222 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$729.46 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address Blue Chip Building Maintenance Inc. 242 30th Street New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$419.17 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address Bodenkraft Handcrafted Artisan Flooring 167 Stone Hill Road Colts Neck, NJ 07722 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$2,020.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address Breakaway Courier Systems 444 West 36th Street New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$102.65 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address Brian McMahon 40 Bond Street New York, NY 10012 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address Canon Financial Services, Inc. 14904 Collections Center Drive Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$9,050.68 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Canon Solutions America 300 Commerce Square Blvd. Burlington, NJ 08016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$1,653.25 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.19	Nonpriority creditor's name and mailing address CARR-Xerox 500 Commack Road Commack, NY 11725 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$961.54
3.20	Nonpriority creditor's name and mailing address Celtic Services NYC Inc. 156 Mt. Vernon Avenue, Suite 210 Mount Vernon, NY 10550 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
3.21	Nonpriority creditor's name and mailing address Citicards P.O. Box 6148 Sioux Falls, SD 57117 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,000.00
3.22	Nonpriority creditor's name and mailing address City Stone World Inc. 149-14 45th Avenue Flushing, NY 11355 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,350.00
3.23	Nonpriority creditor's name and mailing address City View Blinds of NY Inc. 315 West 39th Street New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,627.00
3.24	Nonpriority creditor's name and mailing address Clermont Specialty Managers 301 Route 17 North, Suite 900 Rutherford, NJ 07070 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Management Company for Jagdeo Sedoo</u> <u>(Insurance Claim)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.25	Nonpriority creditor's name and mailing address ColdSpring 17482 Granite West Road Cold Spring, MN 56320 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,866.23

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3.26	Nonpriority creditor's name and mailing address Cole Schotz P.C. Nolan E. Shanahan 1325 Avenue of the Americas, Suite 1900 New York, NY 10019 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys to Piano I, LLC (Litigation)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Nonpriority creditor's name and mailing address Con Edison JAF STATION, P.O. Box 1702 New York, NY 10116 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$69.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address Con Edison JAF STATION, P.O. Box 1702 New York, NY 10116 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,310.37 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	Nonpriority creditor's name and mailing address Conference Calls Unlimited P.O. Box 1990 Fairfield, IA 52556 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$21.03 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	Nonpriority creditor's name and mailing address Cozzolino Furniture Design, Inc. 20 Standish Avenue West Orange, NJ 07052 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$14,078.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	Nonpriority creditor's name and mailing address D.B.S.Y. Service, Inc. 932 Huntington Avenue Bronx, NY 10465 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$73,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32	Nonpriority creditor's name and mailing address Danker Milstein & Ruffo, P.C. Marcelo A. Buitrago, Esq. 595 Madison Avenue, 36th Floor New York, NY 10022 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys for David Varga (Insurance Claim)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.33	Nonpriority creditor's name and mailing address David Schlachet 231 10th Avenue New York, NY 10011 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$586,302.26
3.34	Nonpriority creditor's name and mailing address David Schluldiner Inc. 35 Irving Avenue Brooklyn, NY 11237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,813.00
3.35	Nonpriority creditor's name and mailing address Digital Fabrication Workshop Inc. (Digif 99 South 3rd Street, Suite #2 Hudson, NY 12534 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,647.00
3.36	Nonpriority creditor's name and mailing address Donato Inc. 461 Wild Avenue Staten Island, NY 10314 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,270.50
3.37	Nonpriority creditor's name and mailing address Duffy's Floor Service Inc. 63-35 Grand Avenue Maspeth, NY 11378 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,448.00
3.38	Nonpriority creditor's name and mailing address Dutchman Contracting, Inc. 8 Lookout Pass Putnam Valley, NY 10579 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39,077.00
3.39	Nonpriority creditor's name and mailing address Dykes Lumber Company, Inc. 1899 Park Avenue, P.O. Box 857 Weehawken, NJ 07086 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,953.00

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3.40	Nonpriority creditor's name and mailing address EDM USA Inc. 22 East 21st Street, Suite 7R New York, NY 10010 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111,141.00
3.41	Nonpriority creditor's name and mailing address Everbank Commercial Financial 10 Waterview Boulevard Parsippany, NJ 07054 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,653.16
3.42	Nonpriority creditor's name and mailing address Executive Color Systems, Inc. 42 West 39th Street, 18th Floor New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$429.37
3.43	Nonpriority creditor's name and mailing address Feldman Lumber 1281 Metropolitan Avenue Brooklyn, NY 11237 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,161.40
3.44	Nonpriority creditor's name and mailing address First Insurance Funding 450 Skokle Boulevard, Suite 1000 Northbrook, IL 60062 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160,051.29
3.45	Nonpriority creditor's name and mailing address Five Star Carting, Inc. 5835 47th Street Maspeth, NY 11378 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,875.00
3.46	Nonpriority creditor's name and mailing address Full Scale Woodworking, Inc. 945 Rahway Avenue Union, NJ 07083 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,900.00

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3.47	Nonpriority creditor's name and mailing address H. Brickman & Sons 55 First Avenue New York, NY 10003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.48	Nonpriority creditor's name and mailing address Henick-Lane Inc. 45-39 Davis Street Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,152.00
3.49	Nonpriority creditor's name and mailing address High-Light Electrical Corp. 373 South 1st Street Brooklyn, NY 11211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,975.00
3.50	Nonpriority creditor's name and mailing address Home Depot Attn: Legal Department 2455 Paces Ferry Road Atlanta, GA 30339 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,224.44
3.51	Nonpriority creditor's name and mailing address Horus Bronze 175 Van Dyke Street Brooklyn, NY 11231 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39,029.00
3.52	Nonpriority creditor's name and mailing address IESI - NY Corporation 99 Wood Avenue South, #1001 Iselin, NJ 08830 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$828.95
3.53	Nonpriority creditor's name and mailing address J. Vulpis & Son Inc. 13 Holdman Place Millstone Township, NJ 08535 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,680.00

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3.54	Nonpriority creditor's name and mailing address J.A.G. & H.E. Construction, Inc. 35-12 Bradley Avenue, Suite 1R Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,895.00
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3.55	Nonpriority creditor's name and mailing address Jane B. Holzer 41 East 65th Street New York, NY 10065 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.56	Nonpriority creditor's name and mailing address Janovic 30-35 Thomson Avenue Long Island City, NY 11101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,674.45
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3.57	Nonpriority creditor's name and mailing address Jody Gorton 108 West 76th Street New York, NY 10023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.58	Nonpriority creditor's name and mailing address John Trani Plumbing & Heating, Inc. 17 West 20th Street, Suite #5W New York, NY 10011 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,109.38
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3.59	Nonpriority creditor's name and mailing address JP Morgan Chase Bank, NA 201 North Walnut Street Wilmington, DE 19801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,679.50
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3.60	Nonpriority creditor's name and mailing address JV Woodworking Inc. 16-63 Cody Avenue Ridgewood, NY 11385 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,000.00
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3.61	Nonpriority creditor's name and mailing address Kamco Supply Corp. 80 21st Street Brooklyn, NY 11232 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,100.70 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.62	Nonpriority creditor's name and mailing address Kim & Joe Carroll 2 Monitor Street Brooklyn, NY 11222 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.63	Nonpriority creditor's name and mailing address KIP America 21146 Network Place Chicago, IL 60673 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,639.90 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.64	Nonpriority creditor's name and mailing address Klima New York, LLC. 425 McFarlan Road, Suite 209 Kennett Square, PA 19348 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$894.95 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.65	Nonpriority creditor's name and mailing address Kohan Law Group Patricia Medina, Esq. 1180 Northern Blvd., Suite 201 Manhasset, NY 11030 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys for Milciades Read (Insurance Claim)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.66	Nonpriority creditor's name and mailing address Kongs Carpenters Management Inc. 127-07 23rd Avenue College Point, NY 11356 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$37,365.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.67	Nonpriority creditor's name and mailing address Kweit, Mantell & Delucia, LLP. 225 Broadhollow Road, Suite 213 Melville, NY 11747 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,142.01 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Taocon, Inc. Name _____	Case number (if known) _____
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3.68	Nonpriority creditor's name and mailing address Larimore Hampton Pivar 15 West 67th Street, #4FW New York, NY 10023 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.69	Nonpriority creditor's name and mailing address Law Office of Matthew T. Worner Matthew T. Worner 90 Bryant Avenue White Plains, NY 10605 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys for Urban D.C. Inc. (Litigation)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.70	Nonpriority creditor's name and mailing address Limongelli Electric Corp 214-41 42nd Avenue Bayside, NY 11361 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$37,528.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.71	Nonpriority creditor's name and mailing address Long Shot Crane LLC 89 North 10th Street Brooklyn, NY 11249 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$525.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.72	Nonpriority creditor's name and mailing address LVL - USA 969 3rd Avenue, 3rd Floor, Suite #3-1 New York, NY 10022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,885.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.73	Nonpriority creditor's name and mailing address M. La Penna Refrigeration, Inc. 178 Herrick Road Mineola, NY 11501 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,520.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.74	Nonpriority creditor's name and mailing address Makuna Tile, Inc. 66-36 Pleasant View Street Middle Village, NY 11379 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$18,998.75 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Taocon, Inc. <small>Name</small>	Case number (if known) _____
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3.75	Nonpriority creditor's name and mailing address Manhattan Mini Storage LLC 420 East 62nd Street New York, NY 10065 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,870.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.76	Nonpriority creditor's name and mailing address Marshall Conway & Bradley, P.C. Robert J. Conway 45 Broadway, Suite 740 New York, NY 10006 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys for Ramashon Jagdeo (Litigation)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.77	Nonpriority creditor's name and mailing address Maspeth 59-30 54th Street Maspeth, NY 11378 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$120,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.78	Nonpriority creditor's name and mailing address MC Construction Consulting Inc. 57-45 57th Drive Maspeth, NY 11378 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$48,420.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.79	Nonpriority creditor's name and mailing address MCA Interiors, Inc. 33-27 70th Street Jackson Heights, NY 11372 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$23,750.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.80	Nonpriority creditor's name and mailing address McKinney Welding Supply Co., Inc. 1145 Bronx River Avenue Bronx, NY 10472 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$66.47 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.81	Nonpriority creditor's name and mailing address MCM Plumbing & Heating Inc. 880 East 141st Street Bronx, NY 10454 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,250.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor **Taocon, Inc.**
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3.82	Nonpriority creditor's name and mailing address McMaster-Carr P.O. Box 7690 Chicago, IL 60680 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,991.84
3.83	Nonpriority creditor's name and mailing address Metal Men Restoration LLC. 245 East 3rd Street Mount Vernon, NY 10553 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,804.00
3.84	Nonpriority creditor's name and mailing address Mt. Pleasant Management Corp. 855 Lexington Avenue New York, NY 10065 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,174.31
3.85	Nonpriority creditor's name and mailing address New York Little Elves, Inc. 151 First Avenue, P.O. Box 204 New York, NY 10003 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,880.27
3.86	Nonpriority creditor's name and mailing address NYC Glass Works Corp 220 Neptune Avenue Brooklyn, NY 11224 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,950.00
3.87	Nonpriority creditor's name and mailing address Piano I LLC c/o Morici & Morici LLP 600 Third Avenue New York, NY 10016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.88	Nonpriority creditor's name and mailing address PNP Craftsman, Inc. 16-12 Stephen Street Ridgewood, NY 11385 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,215.00

Debtor	Taocon, Inc. <small>Name</small>	Case number (if known) _____
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3.89	Nonpriority creditor's name and mailing address Polar Mechanical Corp. 221 51st Street Brooklyn, NY 11220 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,200.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.90	Nonpriority creditor's name and mailing address Prince Lumber Co., Inc. (Prince Hardware 618 West 47th Street New York, NY 10036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$32,994.23 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.91	Nonpriority creditor's name and mailing address Pro Design Inc. 23-21 48th Street Astoria, NY 11103 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$27,048.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.92	Nonpriority creditor's name and mailing address Promenet, Inc. 42 Broadway, 16th Floor New York, NY 10004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$75.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.93	Nonpriority creditor's name and mailing address Pryor Cashman LLP 7 Times Square New York, NY 10036 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,339.30 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.94	Nonpriority creditor's name and mailing address Puza Construction Corp 1022 43rd Street Brooklyn, NY 11219 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,850.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.95	Nonpriority creditor's name and mailing address Rachel Abromowitz 45 Christopher Street, #6E New York, NY 10014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Debtor	Taocon, Inc.	Case number (if known)	
Name			
3.96	Nonpriority creditor's name and mailing address Ready Refresh by Nestle (Poland Spring) P.O. Box 856192 Louisville, KY 40285 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,320.13
3.97	Nonpriority creditor's name and mailing address Rose Demolition & Carting, Inc. 95 Bruckner Boulevard Bronx, NY 10454 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,285.00
3.98	Nonpriority creditor's name and mailing address S&J Sheet Metal Supply, Inc. (S&J Supply) 526 East 134th Street Bronx, NY 10454 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$236.49
3.99	Nonpriority creditor's name and mailing address Safety Group 458 c/o Levitt Furst Assoc. 520 White Plains Road, 2nd Floor Tarrytown, NY 10591 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$46,069.78
3.100	Nonpriority creditor's name and mailing address Scott Lawin 90 West Broadway, 13th & 14th Floor New York, NY 10007 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.101	Nonpriority creditor's name and mailing address Simons Hardware & Bath, LLC 481 Washington Street, 1N New York, NY 10013 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,747.29
3.102	Nonpriority creditor's name and mailing address Skopein Technology Solutions 149 Madison Avenue, Suite 1186 New York, NY 10016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,775.00

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3.103	Nonpriority creditor's name and mailing address Skyline Windows LLC 220 East 138th Street Bronx, NY 10451 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$4,375.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.104	Nonpriority creditor's name and mailing address SOHOMILK, LLC 55 Hope Street Brooklyn, NY 11211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.105	Nonpriority creditor's name and mailing address Stan Electric Inc. 450 West 36th Street New York, NY 10018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$43,830.73 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106	Nonpriority creditor's name and mailing address Steven Lamazor 441 3rd Street Brooklyn, NY 11215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$285,000.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.107	Nonpriority creditor's name and mailing address TE Systems Inc. 600 Broadhollow Road Melville, NY 11747 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$5,276.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108	Nonpriority creditor's name and mailing address The Cutting Edge Architectural Woodwork, Inc. 20 N. Front Street Bally, PA 19503 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$134,113.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109	Nonpriority creditor's name and mailing address The Gerken Building Corporation Michael Bogard, Esq. 9 East 38th Street, 6th Floor New York, NY 10016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Process of Service for Jagdeo Seedoo (Insurance Claim)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Taocon, Inc.**
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3.110	Nonpriority creditor's name and mailing address The Nanz Company 20 Vandam Street New York, NY 10013 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,947.00
3.111	Nonpriority creditor's name and mailing address The Orchard Group NY, LLC 756 South Street Highland, NY 12528 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,200.00
3.112	Nonpriority creditor's name and mailing address The Perecman Firm P.L.L.C. Carissa A. Peebles, Esq. 250 West 57th Street, Suite 401 New York, NY 10107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys for Jagdeo Seedoo (Insurance Claim)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.113	Nonpriority creditor's name and mailing address Time Mechanicals Inc. 128 East 29th Street New York, NY 10016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,400.00
3.114	Nonpriority creditor's name and mailing address Travelers P.O. Box 660317 Dallas, TX 75266 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$546.00
3.115	Nonpriority creditor's name and mailing address U.S. Bank P.O. Box 790408 Saint Louis, MO 63179 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,084.08
3.116	Nonpriority creditor's name and mailing address United Steel Products - USP 33-40 127th Place Corona, NY 11368 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,675.00

Debtor **Taocon, Inc.** Case number (if known) _____
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3.117	Nonpriority creditor's name and mailing address Urban D.C. Inc. 970 Grand Street Brooklyn, NY 11211 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$363,931.65
3.118	Nonpriority creditor's name and mailing address Verizon P.O. Box 408 Newark, NJ 07101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,345.67
3.119	Nonpriority creditor's name and mailing address Verizon Wireless P.O. Box 408 Newark, NJ 07101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,446.22
3.120	Nonpriority creditor's name and mailing address Verizon Wireless P.O. Box 408 Newark, NJ 07101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,090.39
3.121	Nonpriority creditor's name and mailing address Wenig & Wenig, PLLC Alan Wenig, Esq. 150 Broadway, Suite 911 New York, NY 10038 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys for Clermont Insurance (Litigation)</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.122	Nonpriority creditor's name and mailing address Whiteys LLC. 244 5th Avenue New York, NY 10001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$469.18

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
--------------------------	--	---

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Debtor **Taocon, Inc.**
Name

Case number (if known)

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 3,182,282.06
5c.	\$ 3,182,282.06

Fill in this information to identify the case:

Debtor name **Taocon, Inc.**

United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest
Office Lease (September 15, 2005 through August 31, 2018)
State the term remaining
1 year, 9 months
List the contract number of any government contract _____

**244 Fifth Avenue Corporation
855 Lexington Avenue
New York, NY 10021**

2.2. State what the contract or lease is for and the nature of the debtor's interest
Vehicle Lease (2016 Honda Odyssey)
State the term remaining
List the contract number of any government contract _____

**Bay Ridge Volvo America
d/b/a Bay Ridge Honda Suzuki
3801 4th Avenue
Brooklyn, NY 11209**

2.3. State what the contract or lease is for and the nature of the debtor's interest
Canon Photocopier Lease
State the term remaining
List the contract number of any government contract _____

**Canon Financial Services, Inc.
14904 Collections Center Drive
Chicago, IL 60693**

2.4. State what the contract or lease is for and the nature of the debtor's interest
Printer Lease
State the term remaining
List the contract number of any government contract _____

**EverBank Commerical Finance
10 Waterview Boulevard
Parsippany, NJ 07054**

Debtor 1 **Taocon, Inc.**

First Name

Middle Name

Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

- 2.5. State what the contract or lease is for and the nature of the debtor's interest

Shop Lease

State the term remaining

List the contract number of any government contract

**Harmony Wholesale, Inc.
38-10 29th Street, 3rd Floor
Long Island City, NY 11101**

Fill in this information to identify the case:

Debtor name Taocon, Inc.
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

- | | | | | |
|-------|------------------------|---|-------------------------------|---|
| 2.1 | David Schlachet | 231 10th Avenue, Apt 9B
New York, NY 10011 | Kamco Supply Corp. | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.61</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.2 | David Schlachet | 231 10th Avenue, Apt 9B
New York, NY 10011 | Citibank - Credit Line | <input checked="" type="checkbox"/> D <u>2.1</u>
<input type="checkbox"/> E/F _____
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.3 | Steven Lamazor | 441 3rd Street, 3rd Floor
Brooklyn, NY 11215 | Kamco Supply Corp. | <input type="checkbox"/> D _____
<input checked="" type="checkbox"/> E/F <u>3.61</u>
<input type="checkbox"/> G _____ |
| <hr/> | | | | |
| 2.4 | Steven Lamazor | 441 3rd Street, 3rd Floor
Brooklyn, NY 11215 | Citibank - Credit Line | <input checked="" type="checkbox"/> D <u>2.1</u>
<input type="checkbox"/> E/F _____
<input type="checkbox"/> G _____ |

Fill in this information to identify the case:

Debtor name Taocon, Inc.

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:

From **1/01/2016** to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business

☐ Other _____

Gross revenue
(before deductions and exclusions)

\$9,461,292.36

For prior year:

From **1/01/2015** to **12/31/2015**

☒ Operating a business

☐ Other _____

\$19,160,328.00

For year before that:

From **1/01/2014** to **12/31/2014**

☒ Operating a business

☐ Other _____

\$12,700,417.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

Debtor **Taocon, Inc.**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. SEE SCHEDULE ATTACHED.		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Steven Lamazor 441 3rd Street, 3rd Floor Brooklyn, NY 11215 President	11/6/15 - 11/6/16	\$148,676.41	Payroll, Reimbursements
4.2. David Schlachet 231 10th Avenue, Apt 9B New York, NY 10011 Treasurer	11/6/15 - 11/4/16	\$126,731.25	Payroll
4.3. Jonathan Fogler 39 Whittier Hills Road North Salem, NY 10560 Vice President of Production	11/6/15 - 9/16/16	\$177,911.39	Payroll, Reimbursements
4.4. Mark Grady 270 Lenox Avenue South Orange, NJ 07079 Vice President of Operations	11/6/15 - 10/28/16	\$118,760.00	Payroll
4.5. Erica Lamazor 441 3rd Street, 3rd Floor Brooklyn, NY 11215 Spouse of President	11/6/15 - 10/28/16	\$138,660.00	Payroll

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

Debtor **Taocon, Inc.**

Case number (if known) _____

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1.	Clermont Insurance Company a/s/o Queen of Green, Inc. vs. Taocon, Inc. and John Trani Plumbing and Heating Inc. 154505/2015	Summons for collection of damages totaling \$104,768.08	Supreme Court of the State of New York County of New York 60 Centre Street New York, NY 10007	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Urban D.C. Inc. vs. Mark Groton, et. al. 11-108055	Breach of Contract totaling \$730,135	Supreme Court of the State of New York County of New York 60 Centre Street New York, NY 10007	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3.	Ramashan Jagdeo vs. Borden House Condominium, et. al. 20815/12	Personal Injury - amount unspecified	Supreme Court of the State of New York County of Bronx 851 Grand Concourse Bronx, NY 10451	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4.	Piano I, LLC vs. Taocon, Inc., et. al. 655304/2016	Breach of Contract for services totaling \$2,000,000.	Supreme Court of the State of New York County of New York 60 Centre Street New York, NY 10007	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Debtor **Taocon, Inc.**

Case number (if known)

Description of the property lost and how the loss occurred

Amount of payments received for the loss

Dates of loss

Value of property lost

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

**Who was paid or who received the transfer?
Address**

If not money, describe any property transferred

Dates

Total amount or value

11.1. **Klestadt Winters Jureller
Southard & Stevens, LLP
200 West 41st Street, 17th
Floor
New York, NY 10036**

2/26/2016

\$5,000.00

Email or website address

Who made the payment, if not debtor?

11.2. **Klestadt Winters Jureller
Southard & Stevens, LLP
200 Wet 41st Street, 17th
Floor
New York, NY 10036**

11/7/2016

\$10,335.00

Email or website address

Who made the payment, if not debtor?

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device

Describe any property transferred

Dates transfers were made

Total amount or value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

**Who received transfer?
Address**

Description of property transferred or payments received or debts paid in exchange

Date transfer was made

Total amount or value

Debtor **Taocon, Inc.**

Case number (if known) _____

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply**Address****Dates of occupancy
From-To****Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☐ No. Go to Part 9.☐ Yes. Fill in the information below.**Facility name and address****Nature of the business operation, including type of services
the debtor provides****If debtor provides meals
and housing, number of
patients in debtor's care****Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**☐ No.☐ Yes. State the nature of the information collected and retained.**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**☐ No. Go to Part 10.☒ Yes. Does the debtor serve as plan administrator?☐ No Go to Part 10.☐ Yes. Fill in below:**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None**Financial Institution name and
Address****Last 4 digits of
account number****Type of account or
instrument****Date account was
closed, sold,
moved, or
transferred****Last balance
before closing or
transfer****19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None**Depository institution name and address****Names of anyone with
access to it
Address****Description of the contents****Do you still
have it?**

Debtor **Taocon, Inc.**

Case number (if known)

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☐ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
Manhattan Mini Storage 420 East 62nd Street New York, NY 10021	Debtor's officers	Miscellaneous	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None
Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	----------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case.

Include this information even if already listed in the Schedules.

Debtor **Taocon, Inc.**

Case number (if known) _____

☒ None**Business name address****Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None**Name and address****Date of service****From-To**

26a.1. **Larry Kweit**
Kweit, Mantell & Delucia CPAs
534 Broadhollow Rd., Ste. 300
Melville, NY 11747

November 2013 to
Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None**Name and address****If any books of account and records are unavailable, explain why**

26c.1. **Kweit, Mantell & Deluca CPAs**

26c.2. **Steven Lamazor**

26c.3. **David Schlachet**

26c.4. **Mark Grady**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Debtor **Taocon, Inc.**

Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
Steven Lamazor	441 3rd Street, 3rd Floor Brooklyn, NY 11215	President	50%
Name	Address	Position and nature of any interest	% of interest, if any
David Schlachet	231 10th Avenue, Apt 9B New York, NY 10011	Treasurer	50%
Name	Address	Position and nature of any interest	% of interest, if any
Jonathan Fogler	39 Whittier Hills Road North Salem, NY 10560	Vice President of Production	
Name	Address	Position and nature of any interest	% of interest, if any
Mark Grady	270 Lenox Avenue South Orange, NJ 07079	Vice President of Operations	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 SEE ITEM 4			
Relationship to debtor			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
Putnam/Ascensus	EIN: Taocon Inc. #690577

Debtor **Taocon, Inc.**

Case number (if known) _____

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **November 15, 2016**

/s/ Steven Lamazor
Signature of individual signing on behalf of the debtor

Steven Lamazor
Printed name

Position or relationship to debtor **President**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☒ No

☐ Yes

**United States Bankruptcy Court
Southern District of New York**

In re **Taocon, Inc.**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- | | | |
|---|----|------------------|
| For legal services, I have agreed to accept | \$ | 10,335.00 |
| Prior to the filing of this statement I have received | \$ | 0.00 |
| Balance Due | \$ | 10,335.00 |
2. The source of the compensation paid to me was:
- ☒ Debtor ☐ Other (specify):
3. The source of compensation to be paid to me is:
- ☒ Debtor ☐ Other (specify):
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
- Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

November 15, 2016

Date

/s/ Tracy L. Klestadt

Tracy L. Klestadt

Signature of Attorney

Klestadt Winters Jureller Southard & Stevens, LLP

200 West 41st Street

17th Floor

New York, NY 10036-7203

(212) 972-3000 Fax: (212) 972-2245

tklestadt@klestadt.com

Name of law firm

**United States Bankruptcy Court
Southern District of New York**

In re Taocon, Inc.

Debtor(s)

Case No.
Chapter

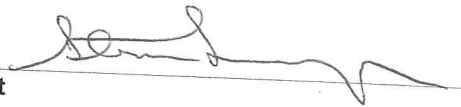
7

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: November 15, 2016

/s/ Steven Lamazor
Steven Lamazor/President
Signer/Title



244 FIFTH AVENUE CORPORATION
855 LEXINGTON AVENUE
NEW YORK, NY 10021

A.R. EQUIPMENT LLC
174 ST. GEORGE ROAD
STATEN ISLAND, NY 10306

ALEJANDRO RAMIREZ MAGANA
721 5TH AVENUE, #61AB
NEW YORK, NY 10022

ALEX & HILDEMARIE LADOUCEUR
540 4TH STREET
BROOKLYN, NY 11215

ALL BORO FLOOR SERVICE, INC.
135 EAST 233RD STREET
BRONX, NY 10470

ALLIED BUILDING PRODUCTS CORP.
15 E. UNION AVENUE
EAST RUTHERFORD, NJ 07073

ALLSTATE SPRINKLER CORP
1869 WHITE PLAINS ROAD
BRONX, NY 10462

AMERICAN SECURITY SYSTEMS, INC.
5-44 50TH AVENUE
LONG ISLAND CITY, NY 11101

APEX CONSTRUCTION INC.
25-03 BODEN AVENUE
LONG ISLAND CITY, NY 11101

APOLLO ELECTRIC USA, INC. DBA ALPHA ELEC
71-51 70TH STREET
RIDGEWOOD, NY 11385

ARISTA AIR CONDITIONING CORP.
38-26 TENTH STREET
LONG ISLAND CITY, NY 11101

ART-IN-CONSTRUCTION, LTD.
63 FLUSHING AVENUE, UNIT 109
BUILDING 3, SHITE 101
BROOKLYN, NY 11205

BAY RIDGE VOLVO AMERICA
D/B/A BAY RIDGE HONDA SUZUKI
3801 4TH AVENUE
BROOKLYN, NY 11209

BENRA & DUAL TILT WINDOWS & DOORS MFG. C
229 GREEN STREET
BROOKLYN, NY 11222

BLUE CHIP BUILDING MAINTENANCE INC.
242 30TH STREET
NEW YORK, NY 10001

BODENKRAFT HANDCRAFTED ARTISAN FLOORING
167 STONE HILL ROAD
COLTS NECK, NJ 07722

BREAKAWAY COURIER SYSTEMS
444 WEST 36TH STREET
NEW YORK, NY 10018

BRIAN MCMAHON
40 BOND STREET
NEW YORK, NY 10012

CANON FINACIAL SERVICES, INC.
14904 COLLECTIONS CENTER DRIVE
CHICAGO, IL 60693

CANON FINANCIAL SERVICES, INC.
14904 COLLECTIONS CENTER DRIVE
CHICAGO, IL 60693

CANON SOLUTIONS AMERICA
300 COMMERCE SQUARE BLVD.
BURLINGTON, NJ 08016

CARR-XEROX
500 COMMACK ROAD
COMMACK, NY 11725

CELTIC SERVICES NYC INC.
156 MT. VERNON AVENUE, SUITE 210
MOUNT VERNON, NY 10550

CITIBANK - CREDIT LINE
P.O. BOX 9241
UNIONDALE, NY 11555

CITICARDS
P.O. BOX 6148
SIOUX FALLS, SD 57117

CITY STONE WORLD INC.
149-14 45TH AVENUE
FLUSHING, NY 11355

CITY VIEW BLINDS OF NY INC.
315 WEST 39TH STREET
NEW YORK, NY 10018

CLERMONT SPECIALTY MANAGERS
301 ROUTE 17 NORTH, SUITE 900
RUTHERFORD, NJ 07070

COLDSPRING
17482 GRANITE WEST ROAD
COLD SPRING, MN 56320

COLE SCHOTZ P.C.
NOLAN E. SHANAHAN
1325 AVENUE OF THE AMERICAS, SUITE 1900
NEW YORK, NY 10019

CON EDISON
JAF STATION, P.O. BOX 1702
NEW YORK, NY 10116

CON EDISON
JAF STATION, P.O. BOX 1702
NEW YORK, NY 10116

CONFERENCE CALLS UNLIMITED
P.O. BOX 1990
FAIRFIELD, IA 52556

COZZOLINO FURNITURE DESIGN, INC.
20 STANDISH AVENUE
WEST ORANGE, NJ 07052

D.B.S.Y. SERVICE, INC.
932 HUNTINGTON AVENUE
BRONX, NY 10465

DANKER MILSTEIN & RUFFO, P.C.
MARCELO A. BUITRAGO, ESQ.
595 MADISON AVENUE, 36TH FLOOR
NEW YORK, NY 10022

DAVID SCHLACHET
231 10TH AVENUE
NEW YORK, NY 10011

DAVID SCHLACHET
231 10TH AVENUE, APT 9B
NEW YORK, NY 10011

DAVID SCHLACHET
231 10TH AVENUE, APT 9B
NEW YORK, NY 10011

DAVID SCHLULDINER INC.
35 IRVING AVENUE
BROOKLYN, NY 11237

DEPARTMENT OF TAXATION & FINANCE
ATTN: OFFICE OF COUNSEL
BUILDING 9, W.A. HARRIMAN CAMPUS
ALBANY, NY 12227

DIGITAL FABRICATION WORKSHOP INC. (DIGIF
99 SOUTH 3RD STREET, SUITE #2
HUDSON, NY 12534

DONATO INC.
461 WILD AVENUE
STATEN ISLAND, NY 10314

DUFFY'S FLOOR SERVICE INC.
63-35 GRAND AVENUE
MASPETH, NY 11378

DUTCHMAN CONTRACTING, INC.
8 LOOKOUT PASS
PUTNAM VALLEY, NY 10579

DYKES LUMBER COMPANY, INC.
1899 PARK AVENUE, P.O. BOX 857
WEEHAWKEN, NJ 07086

EDM USA INC.
22 EAST 21ST STREET, SUITE 7R
NEW YORK, NY 10010

EVERBANK COMMERCIAL FINANCIAL
10 WATERVIEW BOULEVARD
PARSIPPANY, NJ 07054

EVERBANK COMMERICAL FINANCE
10 WATERVIEW BOULEVARD
PARSIPPANY, NJ 07054

EXECUTIVE COLOR SYSTEMS, INC.
42 WEST 39TH STREET, 18TH FLOOR
NEW YORK, NY 10018

FELDMAN LUMBER
1281 METROPOLITAN AVENUE
BROOKLYN, NY 11237

FIRST INSURANCE FUNDING
450 SKOKLE BOULEVARD, SUITE 1000
NORTHBROOK, IL 60062

FIVE STAR CARTING, INC.
5835 47TH STREET
MASPETH, NY 11378

FULL SCALE WOODWORKING, INC.
945 RAHWAY AVENUE
UNION, NJ 07083

H. BRICKMAN & SONS
55 FIRST AVENUE
NEW YORK, NY 10003

HARMONY WHOLESALE, INC.
38-10 29TH STREET, 3RD FLOOR
LONG ISLAND CITY, NY 11101

HENICK-LANE INC.
45-39 DAVIS STREET
LONG ISLAND CITY, NY 11101

HIGH-LIGHT ELECTRICAL CORP.
373 SOUTH 1ST STREET
BROOKLYN, NY 11211

HOME DEPOT
ATTN: LEGAL DEPARTMENT
2455 PACES FERRY ROAD
ATLANTA, GA 30339

HORUS BRONZE
175 VAN DYKE STREET
BROOKLYN, NY 11231

IESI - NY CORPORATION
99 WOOD AVENUE SOUTH, #1001
ISELIN, NJ 08830

INTERNAL REVENUE SERVICE
1 CLINTON AVENUE
ALBANY, NY 12207

J. VULPIS & SON INC.
13 HOLDMAN PLACE
MILLSTONE TOWNSHIP, NJ 08535

J.A.G. & H.E. CONSTRUCTION, INC.
35-12 BRADLEY AVENUE, SUITE 1R
LONG ISLAND CITY, NY 11101

JANE B. HOLZER
41 EAST 65TH STREET
NEW YORK, NY 10065

JANOVIC
30-35 THOMSON AVENUE
LONG ISLAND CITY, NY 11101

JODY GORTON
108 WEST 76TH STREET
NEW YORK, NY 10023

JOHN TRANI PLUMBING & HEATING, INC.
17 WEST 20TH STREET, SUITE #5W
NEW YORK, NY 10011

JP MORGAN CHASE BANK, NA
201 NORTH WALNUT STREET
WILMINGTON, DE 19801

JV WOODWORKING INC.
16-63 CODY AVENUE
RIDGEWOOD, NY 11385

KAMCO SUPPLY CORP.
80 21ST STREET
BROOKLYN, NY 11232

KIM & JOE CARROLL
2 MONITOR STREET
BROOKLYN, NY 11222

KIP AMERICA
21146 NETWORK PLACE
CHICAGO, IL 60673

KLIMA NEW YORK, LLC.
425 MCFARLAN ROAD, SUITE 209
KENNETT SQUARE, PA 19348

KOHAN LAW GROUP
PATRICIA MEDINA, ESQ.
1180 NORTHERN BLVD., SUITE 201
MANHASSET, NY 11030

KONGS CARPENTERS MANAGEMENT INC.
127-07 23RD AVENUE
COLLEGE POINT, NY 11356

KWEIT, MANTELL & DELUCIA, LLP.
225 BROADHOLLOW ROAD, SUITE 213
MELVILLE, NY 11747

LARIMORE HAMPTON PIVAR
15 WEST 67TH STREET, #4FW
NEW YORK, NY 10023

LAW OFFICE OF MATTHEW T. WORNER
MATTHEW T. WORNER
90 BRYANT AVENUE
WHITE PLAINS, NY 10605

LIMONGELLI ELECTRIC CORP
214-41 42ND AVENUE
BAYSIDE, NY 11361

LONG SHOT CRANE LLC
89 NORTH 10TH STREET
BROOKLYN, NY 11249

LVL - USA
969 3RD AVENUE, 3RD FLOOR, SUITE #3-1
NEW YORK, NY 10022

M. LA PENNA REFRIGERATION, INC.
178 HERRICK ROAD
MINEOLA, NY 11501

MAKUNA TILE, INC.
66-36 PLEASANT VIEW STREET
MIDDLE VILLAGE, NY 11379

MANHATTAN MINI STORAGE LLC
420 EAST 62ND STREET
NEW YORK, NY 10065

MARK GRADY
270 LENOX AVENUE
SOUTH ORANGE, NJ 07079

MARSHALL CONWAY & BRADLEY, P.C.
ROBERT J. CONWAY
45 BROADWAY, SUITE 740
NEW YORK, NY 10006

MASPETH
59-30 54TH STREET
MASPETH, NY 11378

MC CONSTRUCTION CONSULTING INC.
57-45 57TH DRIVE
MASPETH, NY 11378

MCA INTERIORS, INC.
33-27 70TH STREET
JACKSON HEIGHTS, NY 11372

MCKINNEY WELDING SUPPLY CO., INC.
1145 BRONX RIVER AVENUE
BRONX, NY 10472

MCM PLUMBING & HEATING INC.
880 EAST 141ST STREET
BRONX, NY 10454

MCMMASTER-CARR
P.O. BOX 7690
CHICAGO, IL 60680

METAL MEN RESTORATION LLC.
245 EAST 3RD STREET
MOUNT VERNON, NY 10553

MT. PLEASANT MANAGEMENT CORP.
855 LEXINGTON AVENUE
NEW YORK, NY 10065

NEW YORK LITTLE ELVES, INC.
151 FIRST AVENUE, P.O. BOX 204
NEW YORK, NY 10003

NYC DEPARTMENT OF FINANCE
ONE CENTRE STREET, 22ND FLOOR
NEW YORK, NY 10007

NYC GLASS WORKS CORP
220 NEPTUNE AVENUE
BROOKLYN, NY 11224

NYS DEPARTMENT OF TAXATION & FINANCE
BANKRUPTCY SECTION
P.O. BOX 5300
ALBANY, NY 12205

PIANO I LLC
C/O MORICI & MORICI LLP
600 THIRD AVENUE
NEW YORK, NY 10016

PNP CRAFTSMAN, INC.
16-12 STEPHEN STREET
RIDGEWOOD, NY 11385

POLAR MECHANICAL CORP.
221 51ST STREET
BROOKLYN, NY 11220

PRINCE LUMBER CO., INC. (PRINCE HARDWARE
618 WEST 47TH STREET
NEW YORK, NY 10036

PRO DESIGN INC.
23-21 48TH STREET
ASTORIA, NY 11103

PROMENET, INC.
42 BROADWAY, 16TH FLOOR
NEW YORK, NY 10004

PRYOR CASHMAN LLP
7 TIMES SQUARE
NEW YORK, NY 10036

PUZA CONSTRUCTION CORP
1022 43RD STREET
BROOKLYN, NY 11219

RACHEL ABROMOWITZ
45 CHRISTOPHER STREET, #6E
NEW YORK, NY 10014

READY REFRESH BY NESTLE (POLAND SPRING)
P.O. BOX 856192
LOUISVILLE, KY 40285

ROSE DEMOLITION & CARTING, INC.
95 BRUCKNER BOULEVARD
BRONX, NY 10454

S&J SHEET METAL SUPPLY, INC. (S&J SUPPLY
526 EAST 134TH STREET
BRONX, NY 10454

SAFETY GROUP 458
C/O LEVITT FUIRST ASSOC.
520 WHITE PLAINS ROAD, 2ND FLOOR
TARRYTOWN, NY 10591

SCOTT LAWIN
90 WEST BROADWAY, 13TH & 14TH FLOOR
NEW YORK, NY 10007

SIMONS HARDWARE & BATH, LLC
481 WASHINGTON STREET, 1N
NEW YORK, NY 10013

SKOPEIN TECHNOLOGY SOLUTIONS
149 MADISON AVENUE, SUITE 1186
NEW YORK, NY 10016

SKYLINE WINDOWS LLC
220 EAST 138TH STREET
BRONX, NY 10451

SOHOMILK, LLC
55 HOPE STREET
BROOKLYN, NY 11211

STAN ELECTRIC INC.
450 WEST 36TH STREET
NEW YORK, NY 10018

STEVEN LAMAZOR
441 3RD STREET
BROOKLYN, NY 11215

STEVEN LAMAZOR
441 3RD STREET, 3RD FLOOR
BROOKLYN, NY 11215

STEVEN LAMAZOR
441 3RD STREET, 3RD FLOOR
BROOKLYN, NY 11215

TE SYSTEMS INC.
600 BROADHOLLOW ROAD
MELVILLE, NY 11747

THE CUTTING EDGE ARCHITECTURAL
WOODWORK, INC.
20 N. FRONT STREET
BALLY, PA 19503

THE GERKEN BUILDING CORPORATION
MICHAEL BOGARD, ESQ.
9 EAST 38TH STREET, 6TH FLOOR
NEW YORK, NY 10016

THE NANZ COMPANY
20 VANDAM STREET
NEW YORK, NY 10013

THE ORCHARD GROUP NY, LLC
756 SOUTH STREET
HIGHLAND, NY 12528

THE PERECMAN FIRM P.L.L.C.
CARISSA A. PEEBLES, ESQ.
250 WEST 57TH STREET, SUITE 401
NEW YORK, NY 10107

TIME MECHANICALS INC.
128 EAST 29TH STREET
NEW YORK, NY 10016

TRAVELERS
P.O. BOX 660317
DALLAS, TX 75266

U.S. BANK
P.O. BOX 790408
SAINT LOUIS, MO 63179

UNITED STEEL PRODUCTS - USP
33-40 127TH PLACE
CORONA, NY 11368

URBAN D.C. INC.
970 GRAND STREET
BROOKLYN, NY 11211

VERIZON
P.O. BOX 408
NEWARK, NJ 07101

VERIZON WIRELESS
P.O. BOX 408
NEWARK, NJ 07101

VERIZON WIRELESS
P.O. BOX 408
NEWARK, NJ 07101

WENIG & WENIG, PLLC
ALAN WENIG, ESQ.
150 BROADWAY, SUITE 911
NEW YORK, NY 10038

WHITEYS LLC.
244 5TH AVENUE
NEW YORK, NY 10001